

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BM		07-06-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-T	913	08/20/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 □ Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 -+ Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
Final	7/1/01	51		101	
Original		52		102	
1		53		103	
2		54		104	
3		55		105	
4		56		106	
5		57		107	
6		58		108	
7		59		109	
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34		86		136	
35		87		137	
36		88		138	
37		89		139	
38		90		140	
39		91		141	
40		92		142	
41		93		143	
42		94		144	
43		95		145	
44		96		146	
45		97		147	
46		98		148	
47		99		149	
48		100		150	
49					
50					

If more than 150 claims or 10 actions
staple additional sheet here

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